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7590

06/09/2005

David A. Farah, M.D.
SHELDON & MAK PC
225 South Lake Avenue, 9th Floor
Pasadena, CA 91101

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Marilyn Paik	(Depositor's name)
	(Signature)
June 13, 2005	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10803,409	03/17/2004	Reid Von Dorstel	12382-4	5555

TITLE OF INVENTION: FILTER CONTAINING A METAL PHTHALOCYANINE AND A POLYCATIONIC POLYMER

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$300	\$1000	09/09/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
WALLS, DIONNE A	1731	131-334000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.563).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
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1. David A. Farah, M.D.

2. SHELDON & MAK PC

3.

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

FILLIGENT LIMITED

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Central, Hong Kong (CHINA)

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

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5. Change in Entity Status (from status indicated above)

- ☒ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature David A. FarahDate June 13, 2005Typed or printed name David A. Farah, M.D.Registration No. 38,134

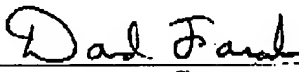

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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TRANSMITTAL OF PAYMENT OF ISSUE FEE (Small Entity) (37 C.F.R. 1.311)					Docket No. 12382.4	
Applicant(s): VON BORSTEL, Reid						
Application No. 10/893,409	Filing Date March 17, 2004	Examiner WALLS, Dionne A.	Customer No. 23676	Group Art Unit 1731	Confirmation No. 5555	
Invention: FILTER CONTAINING A METAL PHTHALOCYANINE AND A POLYCATIONIC POLYMER						
<div style="text-align: center;">Mail Stop Issue Fee COMMISSIONER FOR PATENTS P.O. Box 1450 Alexandria, VA 22313-1450</div>						
Transmitted herewith are the following for the above-identified application.						
<input checked="" type="checkbox"/> Issue Fee Transmittal Form PTOL-85						
<input checked="" type="checkbox"/> Utility Fee: \$ 700.00 <input type="checkbox"/> Design Fee: <input type="checkbox"/> Plant Fee:						
<input checked="" type="checkbox"/> Publication Fee: \$ 300.00 <input checked="" type="checkbox"/> Advance Order - # of Copies <u>6</u> Fee: \$18.00						
<input type="checkbox"/> A check in the amount of is attached.						
<input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. 19-2090 as described below.						
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<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.						
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.						
<div style="text-align: center;"> Signature</div>						
Dated: June 13, 2005						
David A. Farah, M.D. SHELDON & MAK PC 225 South Lake Avenue, 9th Floor Pasadena, California 91101 Tel.: (626) 796-4000 Fax: (626) 795-6321 eMail: davidf@usip.com						
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P35SMALL/REV06